Submit 1 Copy To Appropriate District	1 Copy To Appropriate District State of New Mexico RECE				-	rm C-103
Office <u>District I</u> – (575) 393-6161	Energy, Minerals and Natural Resources			WELL APINC	Revised Ju	ly 18, 2013
1625 N. French Dr., Hobbs, NM 88240 <u>District II</u> – (575) 748-1283	OIL CONSERVATION DIVISION			30-015-45546		
811 S. First St., Artesia, NM 88210 <u>District III</u> – (505) 334-6178	1220 South St. Francis Dr.			5. Indicate Type of Lease STATE ⊠ FEE □		
1000 Rio Brazos Rd., Aztec, NM 87410 <u>District IV</u> – (505) 476-3460	Santa Fe, NM 87505			6. State Oil &		
1220 S. St. Francis Dr., Santa Fe, NM 87505						
SUNDRY NOTICES AND REPORTS ON WELLS (DO NOT USE THIS FORM FOR PROPOSALS TO DRILL OR TO DEEPEN OR PLUG BACK TO A				 Lease Name or Unit Agreement Name Way South ST Com 		
DIFFERENT RESERVOIR. USE "APPLICATION FOR PERMIT" (FORM C-101) FOR SUCH PROPOSALS.)						
1. Type of Well: Oil Well Gas Well Other				8. WellNumber 706H		
2. Name of Operator COG Operating LLC				9. OGRID Number 229137		
 Address of Operator 2208 W. Main Street, Artesia, NM 88210 				10. Pool name or Wildcat Purple Sage; Wolfcamp		
4. WellLocation	<mark>240'</mark>		142			
Unit Letter <u>4</u> :	510 feet from the				n the <u>East</u>	
Section 31 Township 26S Range 28E 11. Elevation (Show whether DR, RKB, RT, GR, etc.)				NMPM	Eddy Co	ounty
3108' GR						
-	propriate Box to Indicat	te Nature of		•		
NOTICE OF INTENTION TO: SUB					EPORTOF:	SING 🗆
TEMPORARILY ABANDON CHANGE PLANS COMMENCE DR						
PULL OR ALTER CASING	MULTIPLE COMPL] CASI	NG/CEMENT	JOB 🗆		
DOWNHOLE COMMINGLE						
OTHER:				ompletion Ope		
13. Describe proposed or comple of starting any proposed wor proposed completion or reco	k). SEE RULE 19.15.7.14 N					
12/6/19 Test 95/8" x 5 1/2" annulus to 1500# for 30 mins. Good test. Set Composite Bridge Plug @ 21,380'. Test to 11,605#.						
1/29/20 to 2/14/20 Perf 9,403 – 21 3/5/20 to 3/6/20 Drill out CFP's. C 3/7/20 to 3/10/20 Set 27/8" 6.5# L	lean down to PBTD @ 21,36	0'.			7,684 gal fluid.	
Spud Date: 5/4/19	Rig Relea	se Date:	7/	20/19		
I hereby certify that the information a	bove is true and complete to	the best of m	y knowledge a	and belief.		
SIGNATURE:_AmandaAvery_	TITLE:	Regulat	ory Analyst	I	DATE: <u>3/23/202</u>	20
Type or print name: <u>Amanda Av</u>	ery E-mail a	ddress: <u>aa</u>	very@concho	.com	PHONE: (575)	748-6962
For State Use Only						
APPROVED BY: Gilbert	Cordero TITLE	Stap	4 MGR	D.	ATE <u>4/3/20</u>	
Conditions of Approval (of any):		Û		4/(09/2020 AB	